

Monthly Vapor Monitoring Log

Record the results of your monthly leak check for each monitoring well. If a portable field instrument is used to perform the monthly leak check, indicate the brand of instrument used and the meter reading for each well. Elevated readings above background levels indicate a possible leak from the tank system and must be reported to the Department. If an automatic sensor is installed in the well, indicate the type of sensor and "Pass" if the monitor has been checked to see if it is operating properly and the system confirms no leaks have occurred. Mark "Fail" if the system indicates a possible leak. **All suspected leaks must be reported within 24 hours to the North Dakota Department of Health, Division of Waste Management 701-328-5166 or Division of Water Quality 701-328-5210, or Emergency Response Reporting 1-800-472-2121.**

Date of This Month's Leak Check:				
Person Performing Leak Check:				
Monitoring Well Location From Site Map	Portable Field Instrument		Automatic Sensor	
	Instrument Brand	Meter Reading	Type of Sensor	Pass/Fail
MW #1				
MW #2				
MW #3				
MW #4				

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